# **REAFFIRMATION OF AFFIDAVIT**

In reference to the Aff	fidavit dated	-	March 20, 2015 for the application (enter date of affidavit)					
The Most Rev Par	ul S. Loverde,	Bishop of the Cathol (enter name(	ic Diocese of s) of applicant	•	successors in	1 ofc		
in Application No(s):	SPA 2015-005	55						
		(enter applica	ntion number(s	5))				
I, Sara V. Mariska, a	attorney/agent		, d	o hereby state tha	t I am an			
(check one) []	applicant (must	be listed in Par. 1(a) of the above-described affidavit)						
[✓]	applicant's auth	orized agent (must be	listed in Par. 1	(a) of the above-o	described affic	davit)		
and that to the best of	my knowledge a	nd belief, the followin	g information	is true:				
(check one) [ ] I have reviewed the above-described affidavit, and the information contained ther true and complete as of (enter today's date)								
[/] I have reviewed the above-described affidavit, and I am submitting a new affidavit includes changes, deletions or supplemental information to those paragraphs of the above-described affidavit indicated below:								
	(Check if applic	able)						
	[ <b>/</b> ] Pa	ragraph 1(a)	]	] Paragraph 2				
	[ <b>/</b> ] Pa	ragraph 1(b)	[	] Paragraph 3				
	[ ] Pa	ragraph 1(c)						
WITNESS the followi (check		Jour V.	2 3 11	cant's Authorized	l Agent			
		Sara V. Mariska, at (Type or print first name)			d title of sign	ee)		
Subscribed and	sworn to before	me this 27 day	of August		_, _2015,	in the		
State/Commonwealth	of Virginia	, Co	ounty/City of	Arlington		·		
			/mlin	LL JULI Johny Public	il_			
My Commission expir	res: 11/30/2015		Re	KIMBERLY K. FOLLIN gistration # 283945 Notary Public MICHMEALTH OF VIRGINIA				

\*MEERLY K FOLUN Registration # 283945 Notary Public COMMONWEATH OF VIRGINIA RECEIVED
Department of Planning & Zoning

NOV 0 2 2015

Application No.(s):	SPA 76 - M - 086-06
	(county-assigned application number(s), to be entered by County Staff)

### SPECIAL PERMIT/VARIANCE AFFIDAVIT

			DATE:	Augu	st 27, 20	15							
				(en	ter date a	ıffidav	it is no	tarize	ed)	1	131	155	57
I, Sara	v. Mariska, a	ttorney	/agent						, do her	eby	state th	nat I am	an
	(enter name of applicant or authorized agent)												
(check	check one)  [ ] applicant  [ ] applicant's authorized agent listed in Par. 1(a) below												
and th	at, to the best o	of my kı	nowledge	e and b	elief, the	e follov	wing is	true:					
1(a).	The following OWNERS, C application,* and all ATTO	CONTR and, if	RACT Plany of th	URCH e foreg	ASERS, going is a	, and L a TRU	ESSE: STEE,	<b>ES</b> of ,** ea	f the land ich <b>BEN</b>	d des	scribed ICIAR	l in the Y of su	ch trust,

(<u>NOTE</u>: All relationships to the application listed above in **BOLD** print must be disclosed. Multiple relationships may be listed together, e.g., **Attorney/Agent**, **Contract Purchaser/Lessee**, **Applicant/Title Owner**, etc. For a multiparcel application, list the Tax Map Number(s) of the parcel(s) for each owner(s) in the Relationship column.)

### **NAME**

(enter first name, middle initial, and last name)

The Most Reverend Paul S. Loverde, Bishop of the Catholic Diocese of Arlington, Virginia and his successors in office (St. Ambrose Catholic Church and School)

Rev.Andrew J. Fisher J. Reid Herlihy Robert W. Nashed Barbara S. Dalmut (former) Mark E. Herrmann Angela M. Rowley

#### ADDRESS

behalf of any of the foregoing with respect to the application:

(enter number, street, city, state, and zip code)

200 North Glebe Road, Suite 704 Arlington, Virginia 22203

# **RELATIONSHIP(S)**

(enter applicable relationships listed in **BOLD** above)

Applicant/Title Owner of Tax Map 59-3 ((1)) 11A

Agent Agent Agent Agent Attorney/Agent Agent

(check if applicable)

- [] There are more relationships to be listed and Par. 1(a) is continued on a "Special Permit/Variance Attachment to Par. 1(a)" form.
- \* In the case of a condominium, the title owner, contract purchaser, or lessee of 10% or more of the units in the condominium.
- \*\* List as follows: <u>Name of trustee</u>, Trustee for (<u>name of trust</u>, <u>if applicable</u>), for the benefit of: (<u>state</u> name <u>of each beneficiary</u>).



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Application No.(s): SPA 76-m (county-a	- <u>しんし - しし</u> ssigned application number(s), to be entered by Cou	nty Staff) Page 1 of 2
Special	Permit/Variance Attachment to Par. 1(a	
DATE	E: August 27, 2015  (enter date affidavit is notarized)	131557
e.g., Attorney/Agent, Cor	olication are to be disclosed. Multiple relation at ract Purchaser/Lessee, Applicant/Title Ovap Number(s) of the parcel (s) for each owner	wner, etc. For a multiparcel
NAME (enter first name, middle initial, and last name)	ADDRESS (enter number, street, city, state, and zip code)	RELATIONSHIP(S) (enter applicable relationships listed in BOLD above)
Walsh, Colucci, Lubeley & Walsh, P.C.  Agents: Martin D. Walsh Lynne J. Strobel Timothy S. Sampson (former) M. Catharine Puskar Sara V. Mariska G. Evan Pritchard Andrew A. Painter Matthew J. Aliman Jeffrey R. Sunderland Elizabeth D. Baker Inda E. Stagg Amy E. Friedlander	2200 Clarendon Boulevard Suite 1300 Arlington, Virginia 22201	Attorneys/Planners/Agent Attorney/Agent Planner/Agent
Land Development Consultants, Inc.  Agent: John C. Manganello	10805 Main Street, Suite 700 Fairfax, Virginia 22030	Engineer/Agent
DeLizzio Architects & Planners, PC  Agents: Dennis J. DeLizzio Barbara R. Seligson	12 S. Adams Street Rockville, MD 20850	Architect/Agent

(check if applicable) [/] There are more relationships to be listed and Par. 1(a) is continued further on a "Special Permit/Variance Attachment to Par. 1(a)" form.

NOV 0 2 2015

	アーク ピーベル ssigned application number(s), to be entered by Cour Permit/Variance Attachment to Par. 1(a)	Page $2$ of $2$
DATE	: August 27, 2015  (enter date affidavit is notarized)	131557
e.g., Attorney/Agent, Con	lication are to be disclosed. Multiple relation tract Purchaser/Lessee, Applicant/Title Ovap Number(s) of the parcel (s) for each owner	wner, etc. For a multiparcel
NAME (enter first name, middle initial, and last name)	ADDRESS (enter number, street, city, state, and zip code)	RELATIONSHIP(S) (enter applicable relationships listed in BOLD above)
M.J. Wells & Associates, Inc.  Agents: Robin L. Antonucci Michael J. Workosky John A. Schick	1420 Spring Hill Road, Suite 610 Tysons, VA 22102	Transportation Consultant/ Agent
Zimar and Associates, Inc.  Agent: Donald E. Zimar	10105-C Residency Road Manassas, Virginia 20110	Arborist/Agent

(check if applicable)

[ ] There are more relationships to be listed and Par. 1(a) is continued further on a "Special Permit/Variance Attachment to Par. 1(a)" form.

NOV 0 2 2015

Application No.(s):	SPA	76-M-086-a
		(county-assigned application number(s), to be entered by County Staff)

SPECIAL PERMIT/VARIANCE AFFIDAVIT

Page Two

DATE: August 27, 201	5	
(enter date af	fidavit is notarized)	1315

1(b). The following constitutes a listing\*\*\* of the **SHAREHOLDERS** of all corporations disclosed in this affidavit who own 10% or more of any class of stock issued by said corporation, and where such corporation has 10 or less shareholders, a listing of all of the shareholders:

(NOTE: Include SOLE PROPRIETORSHIPS, LIMITED LIABILITY COMPANIES, and REAL ESTATE INVESTMENT TRUSTS herein.)

#### CORPORATION INFORMATION

NAME & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code) Walsh, Colucci, Lubeley & Walsh, P.C. 2200 Clarendon Boulevard, 13th Floor Arlington, Virginia 22201

## **DESCRIPTION OF CORPORATION:** (check one statement)

- There are 10 or less shareholders, and all of the shareholders are listed below.
- There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.
- [ ] There are <u>more than 10</u> shareholders, but <u>no shareholder owns 10% or more of any class</u> of stock issued by said corporation, and no shareholders are listed below.

### NAMES OF SHAREHOLDERS: (enter first name, middle initial, and last name)

Wendy A. Alexander, David J. Bomgardner, E. Andrew Burcher, Thomas J. Colucci, Michael J. Coughlin, Peter M. Dolan, Jr., Jay du Von, William A. Fogarty, John H. Foote, H. Mark Goetzman, Bryan H. Guidash, Michael J. Kalish, J. Randall Minchew, Andrew A. Painter,

(check if applicable) [/] There is more corporation information and Par. 1(b) is continued on a "Special Permit/Variance Attachment 1(b)" form.

\*\*\* All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively until (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning 10% or more of any class of stock. In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE\* of the land that is a partnership, corporation, or trust, such successive breakdown must include a listing and further breakdown of all of its partners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include breakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER or LESSEE\* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated as corporations, with members being deemed the equivalent of shareholders; managing members shall also be listed. Use footnote numbers to designate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the attachment page.

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Application No.(s): SPA 26-177-0 Ro-060 (county-assigned application number(s), to be entered by County Staff)
Page 1 of 2
Special Permit/Variance Attachment to Par. 1(b)
Special Permit/Variance Attachment to Par. 1(b)  DATE: August 27, 2015
(enter date affidavit is notarized)
NAME & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code) Land Development Consultants, Inc. 10805 Main Street, Suite 700 Fairfax, Virginia 22030
<b>DESCRIPTION OF CORPORATION:</b> (check <u>one</u> statement)
[/] There are 10 or less shareholders, and all of the shareholders are listed below.
[ ] There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.
[ ] There are <u>more than 10</u> shareholders, but <u>no shareholder owns 10% or more</u> of any class of stock issued by said corporation, and <u>no shareholders are listed below</u> .
John C. Manganello, Sole Shareholder
DESCRIPTION OF CORPORATION: (check one statement)
<ul> <li>[7] There are 10 or less shareholders, and all of the shareholders are listed below.</li> <li>[ ] There are more than 10 shareholders, and all of the shareholders owning 10% or more of any class of stock issued by said corporation are listed below.</li> <li>[ ] There are more than 10 shareholders, but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.</li> </ul>
NAMES OF THE SHAREHOLDERS: (enter first name, middle initial, and last name)  Dennis J. Delizzio
(check if applicable) [  There is more corporation information and Par. 1(b) is continued further on a "Special Permit/Variance Attachment to Par. 1(b)" form.

NOV 0 2 2015

Application No.	(s): SDA	76-m	7-086-	OCO.							_	
••		(county-a	ssigned appl	ication nu	ımber(s)	, to be er	ntered b	y Coun	ty Staff)	) Pag	e 2 of 2	
		Special	Permit/V	ariance	Attacl	hment	to Pai	r. 1(b)			· · · · · · · · · · · · · · · · · · ·	
		DATI	E: August (enter	27, 201 r date af		is nota	rized)			13	,1557	=
NAME & AD M.J. Wells & Ass 1420 Spring Hill Tysons, VA 2210	sociates, Inc. Road, Suite 61		ATION: (	enter con	nplete na	ame, nur	mber, s	treet, ci	ty, state	e, and z	rip code)	
DESCRIPTIO  [ ]  [ /]  [ ]  NAMES OF T  M.J. Wells & Ass Stock Ownership eligible plan parti employee owns 1 stock.	There are class of sto There are stock issue THE SHAR sociates, Inc. E Trust. All emcipants; howe	10 or less shower than 10 ock issued by more than 10 ed by said content tha	nareholders, observables shareholders, said corporation, and or shareholder progration, and other shareholders.	and all of rs, and al ration are rs, but no nd no sha	f the sha il of the listed b shareh areholde	shareho below. older owers are lis	lders or vns 10% sted bel	wning I <u>% or mo</u> low.	10% or r o <u>re</u> of an			
NAME & ADI Zimar and Associ 10105-C Residen Manassas, Virgin	iates, Inc. cy Road	CORPORA	TION: (en	ter compl	====== lete nam	:===== ie, numb	er, stre	et, city	, state, a	and zip	code)	=
DESCRIPTIO	N OF COR	PORATIO	N: (check o	<u>ne</u> statem	nent)							
[]	There are class of ste	10 or less sh more than 10 ock issued by more than 10 sued by said	O shareholde y said corpo O shareholde	rs, and al ration are ers, but <u>no</u>	ll of the listed be shareh	shareho selow. older ov	lders o	wning 1 <u>6 or mo</u>	10% or 1			
NAMES OF T Donald E. Zimar,			S: (enter firs	st name, i	middle i	nitial, ar	nd last	name)				
check if applic	able) [		e is more cor							d furth	er on a	=

NOV 0 2 2015

Application No.(s): $\sqrt{PA} = 7(a-P) = 0.8(a-p)/c$	
Application No.(s):     The The Old - Old     (county-assigned application number(s), to be entered by County Staff)     Page 7     Special Permit/Variance Affidavit	Γhree
DATE: August 27, 2015  (enter date affidavit is notarized) (3)	7
1(c). The following constitutes a listing*** of all of the <b>PARTNERS</b> , both <b>GENERAL</b> and <b>LIMITED</b> any partnership disclosed in this affidavit:	 , in
PARTNERSHIP INFORMATION	
PARTNERSHIP NAME & ADDRESS: (enter complete name, number, street, city, state, and zip code) None	
(check if applicable) [ ] The above-listed partnership has <u>no limited partners</u> .	
NAMES AND TITLE OF THE PARTNERS (enter first name, middle initial, last name, and title, e.g. General Partner, Limited Partner, or General and Limited Partner)	

(check if applicable) [ ] There is more partnership information and Par. 1(c) is continued on a "Special Permit/Variance Attachment to Par. 1(c)" form.

\*\*\* All listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively until: (a) only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning 10% or more of any class of stock. In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE\* of the land that is a partnership, corporation, or trust, such successive breakdown must include a listing and further breakdown of all of its partners, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include breakdowns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE\* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated as corporations, with members being deemed the equivalent of shareholders; managing members shall also be listed. Use footnote numbers to designate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the attachment page.

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Applic	ation N	Io.(s): <u>SOA 7</u>	6-17	-080-06	,			
11		(	county-as	ssigned application	n number(s), to l	be entered by Cour	nty Staff)	Page Four
			SPECI	AL PERMIT	/VARIANCE	AFFIDAVIT		r age r our
			DATE	: August 27,	2015			- 1
				(enter date	e affidavit is n	notarized)	1315	55 1
 l(d).	One	of the following	boxes <u>n</u>	nust be checke	d:			
	[]	of any and all o	other ind of a tru	ividuals who o st) 10% or mor	wn in the aggree of the APPL	b), and 1(c) above egate (directly and ICANT, TITL)	nd as a sharehol	lder, partner,
	[/]	aggregate (dire	ctly and	as a sharehold	er, partner, and	and 1(c) above, beneficiary of a JRCHASER, or	a trust) 10% or i	more of the
2.	mem indiv	no member of the ber of his or her vidually, by own hership owning s	immedi ership of	ate household of stock in a corp	owns or has an	y financial inter	est in the subjec	t land either
	EX(	CEPT AS FOLL	LOWS:	(NOTE: If an	swer is none, e	enter "NONE" o	n the line below	/ <b>.)</b>
	(che	ck if applicable)	[]			be listed and Pa Attachment to Pa		l on a

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Applic	cation No.(s): SPA 76 m (county-ass	- 086-06 signed application number(s), to be entered by County Staff)	 Page Five						
	SPECIA	AL PERMIT/VARIANCE AFFIDAVIT							
	DATE:	August 27, 2015  (enter date affidavit is notarized)	131557						
3.	That within the twelve-month period prior to the public hearing of this application, no member of the Fairfax County Board of Zoning Appeals, Planning Commission, or any member of his or her immediate household, either directly or by way of partnership in which any of them is a partner, employee, agent, or attorney, or through a partner of any of them, or through a corporation in which any of them is an officer, director, employee, agent, or attorney or holds 10% or more of the outstanding bonds or shares of stock of a particular class, has, or has had any business or financial relationship, other than any ordinary depositor or customer relationship with or by a retail establishment, public utility, or bank, including any gift or donation having a value of more than \$100, singularly or in the aggregate, with any of those listed in Par. 1 above.  EXCEPT AS FOLLOWS: (NOTE: If answer is none, enter "NONE" on line below.)  None  (NOTE: Business or financial relationships of the type described in this paragraph that arise after the filing of this application and before each public hearing must be disclosed prior to the public hearings. See Par. 4 below.)								
	(check if applicable) [ ]	There are more disclosures to be listed and Par. 3 is con "Special Permit/Variance Attachment to Par. 3" form.	tinued on a						
4.	and trusts owning 10% or m PURCHASER, or LESSEE* and every public hearing on or supplemental information	ned in this affidavit is complete, that all partnership fore of the APPLICANT, TITLE OWNER, CONTR of the land have been listed and broken down, and this matter, I will reexamine this affidavit and proval, including business or financial relationships of the trise on or after the date of this application.	ACT that prior to each ride any changed						
WIT	NESS the following signature:	Java V. Margue [] Applicant [/] Applicant's Autho							
	(check one)	[] Applicant [/] Applicant's Autho	rized Agent						
		Sara V. Mariska, attorney/agent (type or print first name, middle initial, last name, and	l title of signee)						

Subscribed and sworn to before me this 27 day of August 2015, in the State/Comm. of Virginia, County/City of Arlington.

My commission expires: 11/30/2015

KIMBERLY K. FOLLIN
Registration # 263945
Notary Public
COMMONWEALTH OF VIRGINIA



NOV 0 2 2015

**Zoning Evaluation Division** 

KIMBERLY K. FOLLIN Registration # 283945 Notary Public COMMONIFATH OF VINCHIA